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5-13-03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Timothy J. Williams
Serial No.: 09/577,861
Title: ADJUSTABLE MICROCONTROLLER WAKE-UP SCHEME
Filed: May 24, 2000
Attorney Docket No.: 0325.00339
Examiner: Wang, A.
Art Unit: 2185
In Response To: Office Action mailed February 13, 2003

RECEIVED

MAY 12 2003

Technology Center 2100

I hereby certify that this letter, the response or amendment attached hereto are being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on May 5, 2003.

By: Mary Donna Berkley
Mary Donna Berkley

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed February 13, 2003
please amend the above-identified application as follows:

05/09/2003 ZJUHAR1 00000053 09577861

01 FC:1202

90.00 OP

IN THE SPECIFICATION

Please replace the paragraph beginning at page 3, line 15
with the following paragraph:

GAU-2185\$

C.C.

Attorney Docket: 0325.00339

IN RE APPLICATION OF: Timothy J. Williams

SERIAL NO.: 09/577,861

TITLE: ADJUSTABLE MICROCONTROLLER WAKE-UP SCHEME

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COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TRANSMITTAL AND
EXTENSION OF TIME REQUEST
(IF REQUIRED)

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Technology Center 2100

Sir:

Enclosed please find an amendment and a postcard along with the fee calculation below:

FEE CALCULATION FOR ENCLOSED AND EXTENSION REQUEST (IF ANY)

	Claims Remaining	Highest No. Previous	Extra Rate	Additional Fee
Total Claims	25 minus	20 =	5 x \$ 18.00	\$90.00
Independent Claims	3 minus	3 =	0 x \$ 84.00	\$ 0.00
Multiple Dependent Claim First Added			+ \$280.00	\$ 0.00

TOTAL IF NOT SMALL ENTITY . \$90.00

[] SMALL ENTITY STATUS - If applicable, divide by 2 \$0.00

[] Verified statement enclosed, if not previously filed.

[] Applicant also requests a ____ month extension of time
for response to the outstanding Office Action. The fee is \$0.00

[] Fee set forth in 37 C.F.R. 1.17 (p) for Information Disclosure
under 37 C.F.R. 1.97 (c) \$0.00

TOTAL FEE \$90.00

The Commissioner is hereby authorized to charge any overpayment or underpayment of the above fee associated with this
Communication to Deposit Account No. 50-0541. A duplicate copy of this sheet is attached.

CHRISTOPHER P. MAIORANA, P.C.

24025 Greater Mack, Suite 200
St. Clair Shores, Michigan 48080
(586) 498-0670

By: Robert M. Miller
Robert M. Miller
Registration No.: 42,892

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